

## CLAIMS

SERIAL NO.	FILING DATE
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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49						
50						
TOTAL IND.	2					
TOTAL DEP.	38	2	2	2	2	2
TOTAL CLAIMS	40	38	38	38	38	38

*	*	*	*
IND.	DEP.	IND.	DEP.
51			
52			
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98			
99			
100			
TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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